

## USE OF SUNGLASSES RECOMMENDED

Properly chosen sunglasses can help vision by reducing glare and improving contrast and preventing some direct damage to the eye by ultraviolet light, according to a recent edition of a Health Canada publication, *Issues*. The Health Protection Branch recommends that sunglasses be worn regularly while driving and during exposure to sun. It notes that even inexpensive glasses will provide protection and comfort.

Many manufacturers follow voluntary industry standards by stating the amount of ultraviolet light their glasses block, and their sunglasses have stickers or tags identifying whether the glasses are in the cosmetic (blockage of 0-60% of UV-A and visible light, and 87.5-95% of UV-B), general-purpose (blockage of 60-92% of visible light and UV-A, 95-99% of UV-B) or special-purpose (blockage of up to 97% of visible light, up to 98.5% of UV-A and at least 99% of UV-B light) categories.

## SIDS POSTER DISTRIBUTED

Health Canada is distributing a poster that calls attention to sudden infant death syndrome (SIDS). The poster offers the Health Canada recommendation that healthy infants should be placed on their back or side while sleeping, and infants should live in a smoke-free environment; use of lightweight blankets and clothing is recommended, and

breast-feeding may offer some protection against SIDS. The poster, which is endorsed by the Canadian Foundation for the Study of Infant Deaths, the Canadian Institute of Child Health and the Canadian Paediatric Society, is available by calling 613 957-7193.

## INFORM PEOPLE ABOUT BUDGET'S IMPACT ON HEALTH CARE, CMA TELLS MDs

The government's failure to put health care on a different track from other federally funded programs that had their funding cut in the February budget could threaten accessibility, comprehensiveness and quality of care for patients, says the CMA president. In an Apr. 22 address to the 57th annual meeting of the Quebec Medical Association, Dr. Bruno L'Heureux said physicians have a duty to inform Canadians about the consequences of recent budget measures that created the Canada Health and Social Transfer (CHST), which lumps together health care, education and social-assistance funding, while at the same time reducing federal cash support by \$7 billion. Patients may face reduced access to new technology and longer waits for elective surgery, he warned, and physicians will continue to be asked to do more with fewer resources. He also warned that more physicians will seek greener pastures outside Canada.

A week later, L'Heureux told the 87th annual meeting of the Manitoba

Medical Association that the CMA has already anticipated major changes in the health care system and is positioning itself to move forward on behalf of physicians and patients. Health care financing has been examined in depth, he added, and the CMA has developed a mechanism to evaluate all aspects of core and comprehensive services. He added that a CMA quality-of-care initiative that emphasizes the provision of quality clinical care "might prove to be very helpful if only government wanted to use our knowledge and our expertise." The CMA is also in the midst of developing a CHST work plan that will create a vision of how the medical profession would like to see the health care system evolve. "If ever there was a time when the profession needed to be united and to act together, that time is now," he concluded.

## MEDICAL VOLUNTEERS NEEDED FOR PROJECTS

Youth Challenge International (YCI) is seeking physicians and other medical personnel to participate as volunteer staff and group leaders for projects in Costa Rica and Guyana; participants would leave Canada Oct. 7 and Oct. 21. Medical staff are responsible for the day-to-day health care of YCI members, supervise medical programs and meet with local health agencies to coordinate clinics, immunization and education programs. YCI is a nonprofit organization that provides opportunities for young adults aged 18 to 25 to work

on community development and health and research projects for 10 weeks; for information call 416 971-9846, ext. 308.

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## CANADIAN HOSPITALS ON "BEST OF" LIST

Thirteen of 80 hospitals described in the 1995 revised edition of *Best Hospitals in America* are Canadian, according to a press release from St. Paul's Hospital and the Vancouver Hospital and Health Sciences Centre, two of the facilities named. The book, which was first published in 1987, is described as "a comprehensive guide for the general public to find out which hospitals are providing the most up-to-date treatments and doing so with care and concern for their patients."

Other Canadian hospitals named are Foothills Hospital, Calgary; University of Alberta Hospitals, Edmonton; Hospital for Sick Children, Mount Sinai Hospital, Sunnybrook Health Science Centre and Toronto Hospital, Toronto; Kingston General Hospital, Kingston, Ont.; University Hospital, London, Ont.; Montreal General Hospital and Royal Victoria Hospital, Montreal; and Victoria General Hospital, Halifax.

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## VOLUNTEERS NEEDED FOR WORK MISSION

Medical professionals are invited to join a work mission to the West Bank and Gaza Strip in November. Although ophthalmic surgeons, GPs, physical therapists and radiologists are in greatest demand, all specialties are needed to work in Makassed Hospital, Jerusalem, the Greek Catholic Clinic in Beit Sahour and Dar Salah, and Ahli Arab Hospital in Gaza. For information contact the Michigan-based Arab Community Center for Economic and Social Services, 313 842-7010.

## ANIMAL RIGHTS ACTIVISTS MORE MILITANT

The transport of live animals from England to France and Holland is generating protests that have escalated in size, intensity and militancy, according to the Canadians for Health Research *Diary*. Even though one prominent protester died in February after falling under a transport truck, protesters continue to instigate violent clashes, death threats, letter bombs, harassment and destruction of personal property.

Closer to home, the *Diary* reports that the Canadian Council on Animal Care's national animal utilization survey indicates that more than 2 million animals were used for research, teaching and testing in 1993, a reduction of 3.6% from the previous year; the species most utilized were fish (32%), mice (29%), rats (15%) and chickens (9.4%).

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## CUTS TO SCIENCE BUDGET INCONSISTENT WITH SCIENCE POLICY

If support for the advancement of science and research is indeed a component of the federal government's science policy, Ottawa must provide tangible proof of its commitment in the near term, according to the national president of Canadians for Health Research. In the spring issue of *Future Health/ Perspectives santé*, Patricia Guyda says the cuts to the budgets of the Medical Research Council of Canada, the Natural Sciences and Engineering Research Council and the Humanities Research Council do not reflect the importance the Liberal government says it places on science.

"If the current climate of underfunding persists and profit is considered the primary motivation for research, even in the health and social sciences, it's difficult to conceive that

a solid science base will continue to exist in Canada," wrote Guyda. "Given the opportunity, the best and brightest scientists will leave and young Canadians will opt for other career choices."

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## SIMULATION FACILITY OPENS AT SUNNYBROOK

Canada's first medical-simulation facility has opened at Toronto's Sunnybrook Health Science Centre under the direction of the Department of Anesthesia, the hospital's *Research Update* says. The mission of the Canadian Simulation Centre for Human Performance and Crisis Management Training is to study human behaviour during emergencies and train health care professionals in the management of crises such as unexpected cardiac arrest, major blood loss, life-threatening allergic reactions and critical situations encountered during operations, emergencies and traumas.

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## 518 MEASLES CASES REPORTED IN 1994

Canada reported 518 measles cases during 1994, a major increase over 1993 (204 cases) but substantially lower than 1991 (6178 cases) and 1992 (3011 cases), according to the February/March issue of *Health Canada's Measles Update*. In Ontario, which reported 61.5% of cases, two outbreaks peaked in May; in Quebec, which accounted for 24.7% of cases, two outbreaks peaked in June and July. Prince Edward Island, the Yukon and the Northwest Territories were the only measles-free jurisdictions.

An editorial stated that constant surveillance and timely reporting is essential if the disease is to be eliminated. In view of the low measles incidence in Canada, it added, each case should receive specific attention and a thorough epidemiologic investigation.